



ENVIRONMENTAL PROTECTION
AGENCY
2004 MAY 28 PM 2:56
RCRA PROGRAM
BRANCH

GSA Northeast & Caribbean Region

Request to Deactivate EPA ID Number

May 26, 2004

Site Address:

NY2470090109

Federal Building
35 Ryerson Street
Brooklyn, NY

Mailing Address:

U.S. General Services Administration
Northeast and Caribbean Region
26 Federal Plaza, Room 1703
New York, NY 10278

Point of Contact:

William DeNyse, Industrial Hygienist
(212) 264-0506

The Safety and Environmental Management Branch would like to request that the EPA ID number be deactivated for the federal site listed above. The site is no longer owned or operated by the General Services Administration. Since this precludes any further hazardous waste activity for the GSA at this location, GSA requests that the EPA ID number be deactivated.

Please contact me if you have any questions at (212) 264-0506.

Sincerely Yours,

A handwritten signature in black ink that reads "William E. DeNyse". The signature is written in a cursive, flowing style.

William E. DeNyse
Industrial Hygienist
Safety & Environmental Management Branch
U.S. General Services Administration

U.S. General Services Administration
26 Federal Plaza
New York, NY 10278
www.gsa.gov



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

12/16/96

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NY2470090109

FACILITY NAME -> USGSA - FEDERAL BUILDING

MAILING ADDRESS -> 10 METROTECH CTR - 625 FULTON
BROOKLYN, NY 11201

INSTALLATION ADDRESS -> 35 REYERSON ST
BROOKLYN, NY 11205

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: STEVENS, GLORIA
BLDG MGR
USGSA - FEDERAL BUILDING
10 METROTECH CTR - 625 FULTON
BROOKLYN, NY 11201

WALK-IN (FF) (GINDS)

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

U.S. EPA
Form Approved, OMB No. 2050-0028 Expires 9-30-96
GSA No. 0246-EPA-OT

Please refer to the Instructions for Filling Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

99

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

NY2470090109

II. Name of Installation (Include company and specific site name)

FEDERAL BUILDING

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

35 REYERSON STREET

Street (Continued)

City or Town

BROOKLYN

State

Zip Code

NY 11205-

County Code

County Name

047 KINGS

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

10 METROTECH CENTER 625 FULTON

City or Town

BROOKLYN

State

Zip Code

NY 11201-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

STEVENS

GLORIA

Job Title

Phone Number (Area Code and Number)

BLDG MGR

718-254-7104

VI. Installation Contact Address (See Instructions)

A. Contract Address

Location Mailing Other



B. Street or P.O. Box

10 METROTECH CENTER

City or Town

BROOKLYN

State

Zip Code

NY 11201-

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner

US GENERAL SERVICES ADMIN

Street, P.O. Box, or Route Number

10 METROTECH CENTER 625 FULTON

City or Town

BROOKLYN

State

Zip Code

NY 11201-

Phone Number (Area Code and Number)

718-254-7104

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed)

Yes ☐ No ☐

Month Day Year

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (200-2,200 lbs.)
- ☒ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions.

4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace
- ☐ 1. Smelter Deferral
- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
- ☐ a. Utility Boiler
- ☐ b. Industrial Boiler
- ☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
- ☐ a. Transporter
- ☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
- ☐ a. Process
- ☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☐
2. Corrosive (D002) ☒
3. Reactive (D003) ☐
4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (Type or print)

Date Signed

STEPHEN SHUBERT

IH

12/12/96

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)